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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Jo	oint Case):
1.	Your full name			
	Write the name that is on	Charmaine		
	your government-issued picture identification (for	First name	First name	
	example, your driver's license or passport).	Denise	- N. I. II	
		Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Gordon Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9546		

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Debtor 1 Charmaine Denise Gordon

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		6863 Parkway Dr Douglasville, GA 30135 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Douglas				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Charmaine Denise Gordon Case number (if known)

	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chap	oter 7						
		☐ Chap	oter 11						
		☐ Chap							
		☐ Chap	oter 13						
•	How you will pay the fee	ab ord	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
		■ In	eed to pa	y the fee in installm ee in Installments (Of	ents. If you choose this optic	on, sign and attach the Application for Individuals to Pay			
			-	,	•	n only if you are filing for Chapter 7. By law, a judge may,			
		bu ap	it is not re plies to yo	quired to, waive your t our family size and yo	fee, and may do so only if yo u are unable to pay the fee ir	our income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
).	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor	-		Relationship to you			
			District		When	Case number, if known			
			Go to	line 12.					
1.	Do you rent your	□ No.	00 10						
1.	Do you rent your residence?	□ No. ■ Yes.		our landlord obtained	an eviction judgment agains	t you?			
1.		_		our landlord obtained No. Go to line 12.	an eviction judgment agains	t you?			

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Debtor 1 Charmaine Denise Gordon Case number (if known)

ar	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, State	e & ZIP Code		
	separate sheet and attach it to this petition.		Chec	k the appropriate box	to describe your business:		
				• • •	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are c cash-flow § 1116(1)	under Sul choosing to stateme (B).	filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or hoosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S. (B).			
	For a definition of small	■ No.	rann	not filing under Chapt	er ii.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup Code.				
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and I under Subchapter V of Chapter 11.		
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.		
Par	t 4: Report if You Own or	· Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		

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Debtor 1 Charmaine Denise Gordon

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 21-54550-bem Doc 1 Filed 06/15/21 Entered 06/15/21 15:03:19 Desc Main

Page 6 of 50 Document Debtor 1 Charmaine Denise Gordon Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charmaine Denise Gordon **Charmaine Denise Gordon** Signature of Debtor 2 Signature of Debtor 1 Executed on June 9, 2021 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Charmaine Denise Gordon Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Danielle	e J. Eliot	Date	June 9, 2021
Signature of	Attorney for Debtor		MM / DD / YYYY
Danielle J.	. Eliot		
The Law C	Office of Danielle J. Eliot, P.C.		
Firm name			
2470 Wind	•		
SUITE 151			
Marietta, G	SA 30067		
Number, Street,	City, State & ZIP Code		
Contact phone	770-672-6735	Email address	danielle@djelawfirm.com
142243 GA	A		
Bar number & St	tate		

Fill	in th	is inform	ation to identify you	r case:					
De	btor 1		Charmaine Deni	se Gordon					
			First Name	Middle Name		Last Name			
1	btor 2 ouse if,		First Name	Middle Name		Last Name			
Uni	ited S	tates Ban	kruptcy Court for the:	NORTHERN DISTRICT	ΓOF	GEORGIA			
011	ileu c	itates barr	Kruptcy Court for the.	NORTHERN BIOTRIO	- 01	GLORGIA			
1	se nu	mber							and if this is an
(11 K)	iowii,							_	neck if this is an nended filing
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Ωf	fici	al Eor	m 107						
				Affaira far India	. اہ :	.ala Filina far B) a mless um tax	_	444
				Affairs for Indiv			<u> </u>		4/1
				ible. If two married people attach a separate sheet t					
			. Answer every que			or the top or an	y additional page	,o, milo you.	name and ease
Pai	rt 1:	Give De	etails About Your Ma	arital Status and Where Y	ou L	ived Before			
		.4.!		0					
1.	vvna	at is your	current marital statı	18 ?					
		Married							
		Not marr	ied						
2.	Dur	ing the la	st 3 years, have you	lived anywhere other tha	n wł	nere you live now?			
	П	No							
			all of the places you l	ived in the last 3 years. Do	not i	include where you live nov	v		
			, ,			·			
	Del	btor 1 Pri	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
	86	12 Stone	Creek Ct	From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Do	uglasvill	le, GA 30135	2019-2021					From-To:
			v Ridge Dr	From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Do	uglasvill	le, GA 30135	2016-2019					From-To:
2	\A/:4L	sin the les	ot O veere did vev e	var liva with a anavaa ar l		l aguitedant in a commun	it. mromorti otat		3 (Community on monorty
3. stat				ver live with a spouse or l llifornia, Idaho, Louisiana, N					
	_	No Vos Mak	re sure vou fill out Sch	hedule H: Your Codebtors (`∩ffic	rial Form 106H)			
		- 103. Mar	te sare you iii out oo	reduie 11. Tour Codebiors (Oilic	nai i omi roomj.			
Pa	rt 2	Explain	the Sources of You	ır Income					
4.	Did	vou have	any income from er	nployment or from operat	tina	a husiness during this w	ear or the two nr	evious calen	dar voars?
٠.	Fill i	n the total	amount of income yo	u received from all jobs and	d all	businesses, including part	-time activities.	cvious calcii	aar years:
	If yo	u are filing	g a joint case and you	have income that you rece	eive t	ogether, list it only once ur	nder Debtor 1.		
		No							
		Yes. Fill i	n the details.						
				Debtor 1			Debtor 2		
				Sources of income		Gross income	Sources of inc	come	Gross income
				Check all that apply.		(before deductions and exclusions)	Check all that a		(before deductions and exclusions)

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Debtor 1 Charmaine Denise Gordon Case number (if known)

				D.1		D 14 0	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that app	
			rrent year until bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,409.28	☐ Wages, comm bonuses, tips	nissions,
				☐ Operating a business		☐ Operating a bu	usiness
	ist calen ary 1 to		:: per 31, 2020)	■ Wages, commissions, bonuses, tips	\$34,515.02	☐ Wages, comm bonuses, tips	nissions,
				☐ Operating a business		☐ Operating a bu	usiness
			before that: per 31, 2019)	■ Wages, commissions, bonuses, tips	\$28,000.00	☐ Wages, comm bonuses, tips	nissions,
				☐ Operating a business		☐ Operating a bu	usiness
	ist each s ■ No	source a		se and you have income that y	-		
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incor Describe below.	me Gross income (before deductions and exclusions)
Part 3	E List	Certain	Payments You	Made Before You Filed for E	Sankruptcy		
6. A	_	Neither individual During During No During President Pre	r Debtor 1 nor D all primarily for a the 90 days befor Go to line 7 s List below e paid that cre not include	personal, family, or householore you filed for bankruptcy, did re you filed for bankruptcy, did reach creditor to whom you paid	mer debts. Consumer debt d purpose." d you pay any creditor a tota d a total of \$6,825* or more ts for domestic support oblig his bankruptcy case.	al of \$6,825* or more in one or more paym gations, such as child	nents and the total amount you d support and alimony. Also, do
	Yes.			or both have primarily consu ore you filed for bankruptcy, did		al of \$600 or more?	
		■ No	. Go to line 7				
		□ Ye	include pay	each creditor to whom you paid ments for domestic support ob this bankruptcy case.			ou paid that creditor. Do not so, do not include payments to an
			,	and barmaptey dade.			

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Debtor 1 Charmaine Denise Gordon Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No							
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for th	is payment		
			paid	still owe				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No		ments or transfer a	iny property on a	ccount of a deb	t that benefited an		
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for the			
Pa	rt 4: Identify Legal Actions, Repossession	ne and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes, Fill in the details.							
	Case title	Nature of the case	Court or agency		Status of the	case		
	Case number		ocanton agono,		Glatas of this sass			
	LVNV Funding LLC as successor in interest to Credit One Bank NA v	Civil Suit	Magistrate Court of Douglas County		■ Pending□ On appeal□ Concluded			
	Charmaine Gordon 21MV02378				☐ Concluded	1		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ■ No. Go to line 11. ☐ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happened	Í			property		
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amou accounts or refuse to make a payment because you owed a debt? ■ No □ Yes. Fill in the details. 				ounts from your				
	Creditor Name and Address	Describe the action the	creditor took	Date takei	action was า	Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possessi	ion of an assigne	e for the benefi	t of creditors, a		

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Debtor 1 Charmaine Denise Gordon Case number (if known)

Pa	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value						
	Person to Whom You Gave the Gift and Address:									
14.	No No	cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?						
	Yes. Fill in the details for each gift or conti	ribution.								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value						
Pai	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankruptc or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,						
	Yes. Fill in the details.									
	Describe the property you lost and Describe the property you lost and	Date of your loss	Value of property lost							
		clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.								
Pai	t 7: List Certain Payments or Transfers									
16.	consulted about seeking bankruptcy or pre	y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you						
	Yes. Fill in the details.									
		Description and value of any premarks	Data naumant	Amount of						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment						
	Abacus Credit Counseling	25.00	5/22/2021	\$25.00						
	The Law Office of Danielle J. Eliot, P.C 2470 Windy Hill Rd. SUITE 151 Marietta, GA 30067 danielle@djelawfirm.com	169.00 partial filing fee	6/2021	\$169.00						
17.	Within 1 year before you filed for bankruptc promised to help you deal with your creditor Do not include any payment or transfer that you not include any pa		Date payment or transfer was	rty to anyone who Amount of payment						
			made							

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Debtor 1 Charmaine Denise Gordon

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		payme	be any property or nts received or debts exchange	Date transfer was made			
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a :	self-settled	trust or similar device	of which you are a			
	Name of trust	Description and v	alue of the prop	erty transf	erred	Date Transfer was made			
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the cooperative of the cooperativ	y, were any financial ac	counts or instru	uments held	d in your name, or for y	, ,			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 y cash, or other valuables? No	ear before you filed for	bankruptcy, an	y safe dep	osit box or other depos	itory for securities,			
	☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?			
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	,	home within 1	year before	you filed for bankrupte	cy?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that sor for someone. No Yes. Fill in the details.	meone else owns? Inclu	ude any propert	y you borro	owed from, are storing t	for, or hold in trust			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value			
Par	t 10: Give Details About Environmental Info	,							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Debtor 1 Charmaine Denise Gordon

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
		means any location, facility, or property own, operate, or utilize it, including dispo		_	law,	, whether you now own, operate, o	or utilize it or used			
		ardous material means anything an env ardous material, pollutant, contaminant,			s wa	ste, hazardous substance, toxic s	ubstance,			
Rep	ort a	III notices, releases, and proceedings the	at yo	u know about, regardless of wher	n the	ey occurred.				
24.	Has	any governmental unit notified you that	t you	may be liable or potentially liable	un	der or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Наν	re you notified any governmental unit of	any i	release of hazardous material?						
	■ No □ Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adn	ninis	trative proceeding under any envi	iron	mental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.									
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	iture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Conr	nections to Any Business						
27.	Wit	hin 4 years before you filed for bankrupt	cy, d	id you own a business or have ar	ıy oʻ	f the following connections to any	business?			
		☐ A sole proprietor or self-employed in	n a tr	rade, profession, or other activity,	eith	ner full-time or part-time				
		☐ A member of a limited liability comp	any	(LLC) or limited liability partnersh	ip (I	LLP)				
		☐ A partner in a partnership	tner in a partnership							
		☐ An officer, director, or managing ex	ecuti	ve of a corporation						
		☐ An owner of at least 5% of the voting	gor	equity securities of a corporation						
		No. None of the above applies. Go to F	Part 1	2.						
		Yes. Check all that apply above and fill			S.					
	Bu	siness Name		scribe the nature of the business		Employer Identification number	•			
	Address (Number, Street, City, State and ZIP Code)		Nar	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed				
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, d	id you give a financial statement	to a	nyone about your business? Inclu	ıde all financial			
		No								
		Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)									

Part 12: Sign Below

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Debtor 1 Charmaine Denise Gordon Case number (if known)

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Charmaine Denise Gordon
Charmaine Denise Gordon
Signature of Debtor 1

Date
June 9, 2021
Date
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person
Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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		Document	t Page 15 of 50		
Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Charmaine Denis	- Cordon			
Deptor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF	- GEORGIA		
	, ,				
Case number					☐ Check if this is an
					amended filing
Official F	orm 106A/B				
		4			
Scneau	lle A/B: Prop	erty			12/15
1. Do you own of No. Go to P Yes. Where Part 2: Describ Do you own, lesomeone else descriped on the second of the second of the second of the second on the second of the second on the second of the second on the second of	r have any legal or equitable art 2. e is the property? e Your Vehicles ase, or have legal or equives. If you lease a vehicles	uitable interest in any vehic	ilding, land, or similar property? cles, whether they are register G: Executory Contracts and Un		vehicles you own that
3.1 Make:	Kia Soul	Who has an interes ■ Debtor 1 only	t in the property? Check one	the amount of any secu	claims or exemptions. Put gred claims on <i>Schedule D:</i> laims Secured by Property.
Year:	2012	Debtor 1 only			
	ate mileage:	Debtor 1 and Deb	otor 2 only	Current value of the entire property?	Current value of the portion you own?
Other info	ormation:		e debtors and another		
		Check if this is o	community property	\$4,375.00	\$4,375.00
Examples: Bo No Yes Solution Add the dol pages you be Part 3: Describ	pats, trailers, motors, personals, trailers, motors, personals, trailers, motors, personals, trailers, personals, per	onal watercraft, fishing vesse you own for all of your entr . Write that number here	I vehicles, other vehicles, and els, snowmobiles, motorcycle ac ries from Part 2, including any	cessories	\$4,375.00
Do you own o	r have any legal or equit	table interest in any of the f	ollowing items?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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Chamber (ii whow	
6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe	
Household Furnishings	\$600.00
 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games □ No ■ Yes. Describe 	c collections; electronic devices
Household Electronics	\$300.00
 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, contour collections, memorabilia, collectibles ■ No □ Yes. Describe 	oin, or baseball card collections;
 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments ■ No □ Yes. Describe 	es and kayaks; carpentry tools;
 10. Firearms	
 11. Clothes	
Clothing and shoes	\$600.00
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems No □ Yes. Describe	s, gold, silver
13. Non-farm animals Examples: Dogs, cats, birds, horses No □ Yes. Describe	
 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No □ Yes. Give specific information 	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$1,500.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Debtor 1	Charmaine Denise	Gordon	Case number (if known)	
			C	claims or exemptions.
■ No	aples: Money you have in		ome, in a safe deposit box, and on hand when you file your petition	
			ounts; certificates of deposit; shares in credit unions, brokerage houses with the same institution, list each.	s, and other similar
_			Institution name:	
	17.1	. Checking	Bank of America	\$461.00
	17.2	2. Checking	Chase	\$200.00
	s, mutual funds, or pub <i>aples:</i> Bond funds, investr		okerage firms, money market accounts	
		Institution or issuer i	name:	
joint ■ No	venture . Give specific information	·	orated and unincorporated businesses, including an interest in an % of ownership:	LLC, partnership, and
Nego Non-r ■ No	tiable instruments includenegotiable instruments ar . Give specific information	e personal checks, cas e those you cannot tra	tiable and non-negotiable instruments thiers' checks, promissory notes, and money orders. Insfer to someone by signing or delivering them.	
Exam	ement or pension account ples: Interests in IRA, EF		03(b), thrift savings accounts, or other pension or profit-sharing plans	
■ No □ Yes	. List each account separ Typ	rately. e of account:	Institution name:	
Your Exam		sits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or	· others
■ No □ Yes			Institution name or individual:	
23. Annui	ities (A contract for a per	iodic payment of mone	ey to you, either for life or for a number of years)	
Yes	lssuer na	ime and description.		
	Value li	d Insurance/Talcott sted is for early sa /19/2025	t Annuity le of Debtor's final annuity payment of 27,000 due	\$9,125.00
26 U.S	sts in an education IRA , s.C. §§ 530(b)(1), 529A(b		ualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution	n name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	

Entered 06/15/21 15:03:19 Case 21-54550-bem Doc 1 Filed 06/15/21 Page 18 of 50 Document Case number (if known) Debtor 1 Charmaine Denise Gordon 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

No

☐ Yes. Give specific information..

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Deb	tor 1	Charmaine Denise Gordon		Case number (if known)	
36.		the dollar value of all of your entries from Part 4, including art 4. Write that number here			\$9,786.00
Part	5: De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	te in Part 1.	
37. C	o you	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	o to Part 6.			
	Yes. C	Go to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You out own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	it In.	
46. I	Do yoι	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes	Go to line 47.			
	Do yo ι <i>Examμ</i> I No	Describe All Property You Own or Have an Interest in That You a have other property of any kind you did not already list? Des: Season tickets, country club membership Give specific information			
54.	Add 1	the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	1: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$4,375.00		
57.	Part 3	3: Total personal and household items, line 15	\$1,500.00		
58.	Part 4	4: Total financial assets, line 36	\$9,786.00		
59.	Part !	5: Total business-related property, line 45	\$0.00		
		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$15,661.00	Copy personal property total	\$15,661.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$15,661.00

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Fill in this information to identify your case:							
Debtor 1 Charmaine Denise Gordon							
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		OF GEORGIA					
				☐ Check if this is an amended filing			
	Charmaine Denis	Charmaine Denise Gordon First Name Middle Name First Name Middle Name	Charmaine Denise Gordon First Name Middle Name Last Name First Name Middle Name Last Name	Charmaine Denise Gordon First Name Middle Name Last Name First Name Middle Name Last Name			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check	conly one box for each exemption.		
2012 Kia Soul Line from Schedule A/B: 3.1	\$4,375.00		\$4,375.00	O.C.G.A. § 44-13-100(a)(3)	
Line from Schedule AVD. G. 1			100% of fair market value, up to any applicable statutory limit		
Household Furnishings Line from Schedule A/B: 6.1	\$600.00		\$600.00	O.C.G.A. § 44-13-100(a)(4)	
Ellie Hotti Schedule PVB. G. I			100% of fair market value, up to any applicable statutory limit		
Household Electronics Line from Schedule A/B: 7.1	\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(4)	
Ente nom schedule Arb. 111			100% of fair market value, up to any applicable statutory limit		
Clothing and shoes	\$600.00		\$600.00	O.C.G.A. § 44-13-100(a)(4)	
Line nom <i>Schedule PAB</i> . 11.1			100% of fair market value, up to any applicable statutory limit		
Checking: Bank of America	\$461.00		\$461.00	O.C.G.A. § 44-13-100(a)(6)	
LINE HOTH SCHEAUTE AVD. 11.1			100% of fair market value, up to any applicable statutory limit		

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De	ebtor 1 Charmaine Denise Gordon		Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	Checking: Chase Line from Schedule A/B: 17.2	\$200.00		\$200.00	O.C.G.A. § 44-13-100(a)(6)		
	Line Horr Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit			
	Hartford Insurance/Talcott Annuity Value listed is for early sale of	\$9,125.00		\$10,539.00	O.C.G.A. § 44-13-100(a)(6)		
	Debtor's final annuity payment of 27,000 due to her 5/19/2025 Line from <i>Schedule A/B</i> : 23.1			100% of fair market value, up to any applicable statutory limit			
	Hartford Insurance/Talcott Annuity Value listed is for early sale of	\$9,125.00		\$10,000.00	O.C.G.A. § 44-13-100(a)(11)(D)		
	Debtor's final annuity payment of 27,000 due to her 5/19/2025 Line from Schedule A/B: 23.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	t.)		
	Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case?	·		
	□ No □						
	☐ Yes						

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Fill in this information to identify your case:						
Debtor 1	Charmaine Denis	e Gordon				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA			
Case number (if known)					☐ Check if this is an amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			Docur	nent)	
Fill i	n this inform	nation to identify your	case:			
Debt	or 1	Charmaine Denis	e Gordon			
Dobe	.01 1	First Name	Middle Name	Last Name		
Debt						
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTR	CT OF GEORGIA		
Case (if kno	e number wn)					theck if this is an mended filing
Sch	nedule E	n <u>106E/F</u> /F: Creditors W				12/15
any ex Sched Sched Ieft. A name	kecutory controllule G: Executory controlled G: Execut	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	that could result in a cl ired Leases (Official Fo ured by Property. If mo ge. If you have no inforn	aim. Also list executory contracts on 106G). Do not include any cred e space is needed, copy the Part y	creditors with NONPRIORITY clai on Schedule A/B: Property (Offici itors with partially secured claims you need, fill it out, number the en e that Part. On the top of any addit	al Form 106A/B) and on that are listed in tries in the boxes on the
Part		I of Your PRIORITY Ur				
	_	rs have priority unsecure	d claims against you?			
	No. Go to Pa	art 2.				
	☐ Yes.					
Part	2. List Al	I of Your NONPRIORIT	V Unsecured Claims			
		rs have nonpriority unse		.2		
_	_		•			
L	→ No. You hav	ve nothing to report in this p	art. Submit this form to th	e court with your other schedules.		
I	Yes.					
u ti	ınsecured clain	n, list the creditor separatel	y for each claim. For eacl	claim listed, identify what type of cla	ach claim. If a creditor has more tha nim it is. Do not list claims already inc npriority unsecured claims fill out the	cluded in Part 1. If more
						Total claim
4.1	Capital	Bank/Open Sky	Last 4 c	igits of account number		\$1,200.00
	Nonpriority 101 Cro	Creditor's Name ssways Park ury, NY 11797	When w	as the debt incurred?		- + 1,200.00
		treet City State Zip Code	As of th	e date you file, the claim is: Check	all that apply	
	Who incur	rred the debt? Check one.				
	■ Debtor	1 only	☐ Cont	ngent		
	☐ Debtor	2 only	☐ Unlic	-		
	☐ Debtor	1 and Debtor 2 only	☐ Disp			
		t one of the debtors and an		NONPRIORITY unsecured claim:		
		if this claim is for a com	П	ent loans		
	debt	m subject to offset?	Oblig	ations arising out of a separation ago priority claims	reement or divorce that you did not	
	■ No		☐ Debt	s to pension or profit-sharing plans, a	and other similar debts	
	☐ Yes		Othe	Specify Credit Card		

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Charmaine Denise Gordon

Case number (if known)

Charmaine Denise Gordon	Case number (if known)	
Capital One	Last 4 digits of account number	\$5,293.00
P.O. Box 31293	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
_	□ Disputed	
•	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Discover Loan	Last 4 digits of account number	\$16,969.00
P.O. Box 15316	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
Emory Johns Creek Aesthetics	Last 4 digits of account number	\$1,129.94
11975 Morris Rd	When was the debt incurred?	
Alpharetta, GA 30005 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	Contingent	
_	·	
_	•	
<u> </u>	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
	Capital One Nonpriority Creditor's Name P.O. Box 31293 Salt Lake City, UT 84131 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Discover Loan Nonpriority Creditor's Name P.O. Box 15316 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Emory Johns Creek Aesthetics Nonpriority Creditor's Name 11975 Morris Rd 200 Alpharetta, GA 30005 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another	Capital One Capital One

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Case number (# known)

Deptor	Charmaine Denise Gordon	Case number (if known)	
4.5	Hamster Financial Service LLC	Last 4 digits of account number	\$2,650.00
	Nonpriority Creditor's Name P.O. Box 828 Skokie, IL 60076	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u>_</u>	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Account	
4.6	JPMCB Card Services	Last 4 digits of account number	\$7,710.00
	Nonpriority Creditor's Name P.O. Box 15369 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.7	Kaiser Permanente	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name P.O. Box 403055 Atlanta, GA 30384	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

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Debtor	1 Charmaine Denise Gordon	Case number (if known)					
4.8	Kohls/Capital One Bank	Last 4 digits of account number	\$2,000.00				
	Nonpriority Creditor's Name PO Box 3115	When was the debt incurred?					
	Milwaukee, WI 53201 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	\square Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit Card					
	LVNV Funding assignee of Credit						
4.9	One Bank	Last 4 digits of account number	\$2,650.00				
	Nonpriority Creditor's Name PO Box 10497	When was the debt incurred?					
	Greenville, SC 29603 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit CArd					
4.1	US Bank		\$861.00				
0	Nonpriority Creditor's Name	Last 4 digits of account number	φου 1.00				
	P.O. Box 108	When was the debt incurred?					
	Saint Louis, MO 63166	-					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	_	П					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card					

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Debtor	Charmaine Denise Gordon		Case nu	imber (if k	nown)				
4.1	Wellstar Heath Sytem Douglas Hospital	Last 4 digits of account numb	er			\$658.72			
	Nonpriority Creditor's Name P.O. Box 277356 Atlanta, GA 30384	When was the debt incurred?			-				
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Un l iquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsect	ıred claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt	☐ Obligations arising out of a s	eparation ag	reement o	r divorce that you did not				
	Is the claim subject to offset?	report as priority claims							
	No	Debts to pension or profit-sh	aring plans, a	and other s	similar debts				
	Yes	Other. Specify Medical							
4.1	Wellstar Medical Revenue Service	Last 4 digits of account numb	er			\$300.00			
	Nonpriority Creditor's Name P.O. Box 1149	When was the debt incurred?			-	<u> </u>			
-	Sebring, FL 33871 Number Street City State Zip Code	As of the date you file, the cla	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.	_							
	■ Debtor 1 only	Contingent							
	Debtor 2 only	☐ Un l iquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsect	ırad alaim:						
	At least one of the debtors and another	Student loans	irea ciaiiii:						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims	eparation ag	reement o	r divorce that you did not				
	No	Debts to pension or profit-sh	aring nlans a	and other	similar debts				
	Yes	sirillar debte							
		■ Other. Specify Medical							
Part 3:	List Others to Be Notified About a D								
is tryir have n	is page only if you have others to be notified ng to collect from you for a debt you owe to nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	r in Parts 1	or 2, then	list the collection agency	here. Similarly, if you			
	d Address	On which entry in Part 1 or Part 2 did	·	•					
	g & Winter LLC ox 1280	Line 4.2 of (Check one):			vith Priority Unsecured Clai				
	PA 19456	Last 4 digits of account number	■ Part 2: 0	Creditors v	vith Nonpriority Unsecured	Claims			
Name ar	nd Address	On which entry in Part 1 or Part 2 did	you list the o	riginal cred	titor?				
	er & Stenger	Line 4.9 of (Check one):	'	U	vith Priority Unsecured Clai	ms			
	ast Paris Ave		Part 2: 0	Creditors v	vith Nonpriority Unsecured	Claims			
Grand	Rapids, MI 49546	Last 4 digits of account number							
Part 4:	Add the Amounts for Each Type of U	Jnsecured Claim							
	he amounts of certain types of unsecured c f unsecured claim.	laims. This information is for statistic	al reporting	purposes	only. 28 U.S.C. §159. Add	d the amounts for each			
					Total Claim				
Total claims	6a. Domestic support obligatio	ns	6a.	\$	0.00	-			
from Pa	rt 1 6b. Taxes and certain other dek	ots you owe the government	6b.	\$	0.00				
	6c. Claims for death or persona	al injury while you were intoxicated	6c.	\$	0.00	-			

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6j.

41,721.66

Debtor 1	Charmair	ne Denise Gordon	Case number (if known)				
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00		
				T	otal Claim		
otal	6f.	Student loans	6f.	\$	0.00		
laims om Part 2	2 6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	41,721.66		

Total Nonpriority. Add lines 6f through 6i.

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Fill in this infor	mation to identify your	case:		
Debtor 1	Charmaine Denis	e Gordon		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	Oity		Otate	ZII Oodc	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	Oity		Otato	211 0000	
-	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5				2 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

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		Docume	iii raye 30 0	1 30	
Fill in this	s information to identify your	case:			
Debtor 1	Charmaine Denis	se Gordon			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Case num	iher				
(if known)					☐ Check if this is an
					amended filing
Officia	I Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
fill it out, a your name		boxes on the left. Attach Answer every question	n the Additional Page t	o this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
■ NI-					
■ No □ Ye:					
	thin the last 8 years, have you na, California, Idaho, Louisiana				
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	itor or cosigner. Make	sure you have listed t 16G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedule	
3.1				☐ Schedule D, lin	ne
	Name			□ Schedule E/F,	line
				☐ Schedule G, Iir	ne
	Number Street City	State	ZIP Code	_	
3.2				□ Cabadula D. III	
3.2	Name			□ Schedule D, lin □ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to i	dentify your ca	ise:								
			Denise Gordon								
	otor 2 ouse, if filing)										
Uni	ted States Bankruptcy	Court for the	NORTHERN DISTRIC	CT OF GEORGIA		_					
(If kr	se number						☐ An				
	fficial Form 1						MN	/I / DD/ Y	YYY		
S	chedule I: Y	our Inco	ome								12/15
spo atta Par	use. If you are separch a separate sheet	rated and you to this form. (Employment	are married and not filir r spouse is not filing wi On the top of any addition	th you, do not includ	de infor	nati	on about	our spc	ouse. If more	space is	needed,
1.	Fill in your employment information.			Debtor 1				Debtor 2 or non-filing spouse			•
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed				
	information about ac			☐ Not employed				☐ Not employed			
	employers.		Occupation	Administrative Assistant DaVita Kidney Care							
	Include part-time, se self-employed work.		Employer's name								
	Occupation may incor homemaker, if it a		Employer's address	32275 32nd Ave Sotuh Federal W		4 98	8001				
			How long employed th	here? 5 years				_			
Par	rt 2: Give Detai	Is About Mon	thly Income								
	mate monthly incomuse unless you are se		ate you file this form. If y	you have nothing to re	port for	any	line, write	\$0 in the	space. Inclu	de your no	on-filing
	ou or your non-filing sp e space, attach a sepa		re than one employer, co	ombine the information	n for all e	empl	oyers for th	nat perso	n on the line	s below. I	f you need
							For Debt	or 1	For Debto		
2.			ry, and commissions (be calculate what the monthl		2.	\$	3,0	35.16	\$	N/A	<u>\</u>
3.	Estimate and list n	nonth l y overti	me pay.		3.	+\$		0.00	+\$	N/A	<u>\</u>

Calculate gross Income. Add line 2 + line 3.

3,035.16

N/A

Deb	tor 1	Charmaine Denise Gordon	-	С	ase r	number (if kno	wn)				
					For l	Debtor 1			Debtor : filing s		
	Cop	by line 4 here	4.		\$	3,035.	16	\$		N/A	_
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	523.	20	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.	00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.	00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		00	\$		N/A	_
	5e.	Insurance	5e		\$	286.		\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ 	0.		\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g 5h		\$ _	0.		+ \$		N/A N/A	_
^			_		. —			· · · · · ·			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	809.		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$	2,225.	35	\$		N/A	-
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		r		••	Φ.		.	
	Oh	monthly net income.	8a 8b		\$ _	0.		\$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	on	٠.	Φ	0.	00	Ф		N/A	-
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.		\$		N/A	_
	8d.	, , , , , , , , , , , , , , , , , , ,	8d		\$		00	\$		N/A	_
	8e.	Social Security	8e	٠.	\$	0.	00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		00	\$		N/A	_
	8g.	Pension or retirement income	8g		\$	0.		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h _	.+	\$	0.	00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.	00	\$		N/A	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	-	2,225.35	\$		N/A	= \$	2,225.35
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.	Ψ_		.,223.33	Ψ-		11//	-	2,223.33
11.	Star Incliothe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			-			chedule 11.		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	2,225.35
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							Combi monthl	ned ly income
		Van Eurlaine I									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informat	tion to identify yo	our case:					
Deb	tor 1	Charmaine [Denise Go	ordon		Che	ck if this is: An amended filing	
	tor 2 ouse, if filing)						•	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF GEO	RGIA		MM / DD / YYYY	
1	e number nown)							
	fficial Fo							
		J: Your						12/15
info	ormation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Par 1.	t 1: Descr	ibe Your House	hold					
	■ No. Go to	line 2.	in a senar	ate household?				
		0	•	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents i							□ No □ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
2	D							☐ Yes
3.	expenses of	enses include f people other t d your depende	han 👝	No Yes				
exp	imate your ex enses as of a		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
app	olicable date.							
the		n assistance an		government assistance i luded it on Sc <i>hedule I:</i> \			Your exp	enses
4.		r home owners		ses for your residence. I	nclude first mortgage	e 4. S	\$	969.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. S	\$	0.00
	4b. Proper	rty, homeowner's				4b. 9	·	0.00
				ıpkeep expenses		4c. 9	· ———	10.00
5.		owner's associat n ortgage paym e		oominium dues our residence, such as ho	me equity loans	4d. 5		0.00 0.00

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: pest 6d. \$ 7. Food and housekeeping supplies 7. \$ 8. Childcare and children's education costs 8. \$ 9. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 10. \$ 11. Medical and dental expenses 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. \$ 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	175.00 40.00
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: pest 7. Food and housekeeping supplies 7. \$ 8. Childcare and children's education costs 8. \$ 9. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: pest 7. Food and housekeeping supplies 7. \$ 8. Childcare and children's education costs 8. \$ 9. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	40.00
6d. Other. Specify: pest 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	
7. Food and housekeeping supplies 7. S 8. Childcare and children's education costs 8. S 9. Clothing, laundry, and dry cleaning 9. S 10. Personal care products and services 10. Medical and dental expenses 11. S 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. S 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	345.00
7. Food and housekeeping supplies 7. \$ 3. Childcare and children's education costs 8. \$ 3. Clothing, laundry, and dry cleaning 9. \$ 10. Personal care products and services 10. \$ 11. Medical and dental expenses 11. \$ 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 14. Charitable contributions and religious donations 14. \$ 15. Insurance.	20,00
3. Childcare and children's education costs 3. Clothing, laundry, and dry cleaning 4. Personal care products and services 4. Medical and dental expenses 4. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 4. Charitable contributions and religious donations 4. Insurance. 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15. Insurance.	305.35
2. Clothing, laundry, and dry cleaning 3. Personal care products and services 4. Medical and dental expenses 4. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 4. Charitable contributions and religious donations 4. Insurance. Do not include car payments. 4. Charitable contributions and religious donations 4. Insurance.	0.00
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	25.00
11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.	25.00
2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ Insurance. 13. \$ 14. \$ Insurance.	40.00
Do not include car payments. 12. \$ 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. \$ 15. Insurance.	
 Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. 	200.00
14. Charitable contributions and religious donations14. \$	0.00
5. Insurance.	0.00
Do not include insurance deducted from your pay or included in lines 4 or 20	
= =	
15a. Life insurance 15a. \$	0.00
15b. Health insurance	0.00
15c. Vehicle insurance	69.00
15d. Other insurance. Specify:	0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	
Specify: car tags 16. \$	2.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1 17a. \$	0.00
17b. Car payments for Vehicle 2	0.00
17a Othor Specific	0.00
17d. Other. Specify: 17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as	
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	0.00
9. Other payments you make to support others who do not live with you.	0.00
Specify: 19.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property 20a. \$	0.00
20b. Real estate taxes 20b. \$	0.00
20c. Property, homeowner's, or renter's insurance 20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$	0.00
20e. Homeowner's association or condominium dues 20e. \$	0.00
21. Other: Specify: 21. +\$	0.00
Zii Galdii Speeliy.	0.00
22. Calculate your monthly expenses	
22a. Add lines 4 through 21.	2,225.35
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	
22c. Add line 22a and 22b. The result is your monthly expenses.	2,225.35
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	2,225.35
23b. Copy your monthly expenses from line 22c above. 23b\$	2,225.35
23c. Subtract your monthly expenses from your monthly income.	0.00
The result is your monthly net income. 23c. \$	0.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase modification to the terms of your mortgage? No.	or decrease because of a
☐ Yes. Explain here:	
Li res. Lapiain note.	

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Fill in this infor	mation to identify your ca	ise:		
Debtor 1	Charmaine Denise	Gordon		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIg)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF GEORGIA	
Case number				
(if known)				☐ Check if this is an
				amended filing
you have lead You must file the which on the lf two married pusign a sign a	ever is earlier, unless the form eople are filing together ind date the form.	d the lease has n hin 30 days after court extends th n a joint case, bo	not expired. You file your bankruptcy petition or by the date so the time for cause. You must also send copies to the other are equally responsible for supplying correct in some content of the content	e creditors and lessors you list
	our Creditors Who Have		D: Creditors Who Have Claims Secured by Propert	v (Official Form 106D), fill in the
information b	elow.			
identity the ci	reditor and the property tha	it is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's			Surrender the property.	□ No
name:			Retain the property and redeem it.	П у
Description of	f		☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	•		Retain the property and [explain]:	
securing debt			Tretain the property and [explain].	
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
.	•		☐ Retain the property and enter into a	☐ Yes
Description of	Г		Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt				

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

□ No

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Debto	or 1 Charmaine Denise Gordon	Case number (if known)	
pro	scription of perty	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes
sec	curing debt:		_
n the	List Your Unexpired Personal Property Leases by unexpired personal property lease that you listed information below. Do not list real estate leases. Une lay assume an unexpired personal property lease if the	xpired leases are leases that are still in effect; the	lease period has not yet ended.
Desc	ribe your unexpired personal property leases		Will the lease be assumed?
Desci	or's name: ription of leased		□ No
Prope	aty.		☐ Yes
	or's name: ription of leased erty:		□ No □ Yes
	r's name: iption of leased rty:		□ No □ Yes
Lessor's name:			□ No
Desci Prope	ription of leased erty:		☐ Yes
Lessor's name:			□ No
Desci Prope	ription of leased erty:		☐ Yes
	or's name:		□ No
Prope	ription of leased erty:		☐ Yes
	or's name:		□ No
Prope	ription of leased erty:		☐ Yes
Part 3	Sign Below		
	penalty of perjury, I declare that I have indicated my	intention about any property of my estate that sec	cures a debt and any personal
-	s/ Charmaine Denise Gordon	x	
-	Charmaine Denise Gordon Signature of Debtor 1	Signature of Debtor 2	
I	Date June 9, 2021	Date	

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Fill in this infor					
Debtor 1	Charmaine Denis				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,661.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	15,661.00
Par	t 2: Summarize Your Liabilities		
			abilities I you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,721.66
	Your total liabilities	\$	41,721.66
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,225.35
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,225.35
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Charmaine Denise Gordon

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your	00001			
	rmation to identify your				
Debtor 1	Charmaine Denis First Name	e Gordon Middle Name	Last Name		
Debtor 2	, not rains	made Hame	Lastrianis		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Case number					
(if known)]	☐ Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing together	n connection with a bank	nsible for supplying cor		
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare re true and correct.		mary and schedules file	d with this declaration and	
X /s/ Ch	armaine Denise Gord	lon Dorma Gal	x		
	naine Denise Gordon ure of Debtor 1		Signature of	Debtor 2	
Date	June 9, 2021		Date		

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In	re Charmaine Denise Gordon		Case N	o	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 20160 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due			900.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	☐ Debtor ☐ Other (specify): Met Li	fe Legal Insurance			
4.	I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mo	embers and associates of m	ny law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	ts of the bankrupto	y case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor 	ement of affairs and plan which ors and confirmation hearing, an reduce to market value; ex- ons as needed; preparation	n may be required; and any adjourned l emption plannir	nearings thereof;	ng of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis- any other adversary proceeding.			nces, relief from stay a	actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any shankruptcy proceeding.	y agreement or arrangement for	payment to me for	r representation of the deb	tor(s) in
	June 9, 2021	/s/ Danielle J. Eli	ot		
-	Date	Danielle J. Eliot Signature of Attorno The Law Office o 2470 Windy Hill F SUITE 151 Marietta, GA 300	f Danielle J. Elic Rd.	ot, P.C.	
		770-672-6735 Fa	x: 404-891-3417	,	
		danielle@djelawt Name of law firm	firm.com		_
		rume oj taw tirm			

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United States Bankruptcy Court Northern District of Georgia

	1	Northern District of Georgia					
In re C	Charmaine Denise Gordon		Case No.				
		Debtor(s)	Chapter	7			
VERIFICATION OF CREDITOR MATRIX							
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date: Ju	une 9, 2021	7.0, 0.1.0.1.1.0.1.0.0.0.0.0.0.0.0.0.0.0.0.0	Dama Gal				
		Charmaine Denise Gordon					

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	
\$7	8	administrative fee	
+ \$1	5	trustee surcharge	
\$33	8	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
_	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in	this information to identify your case:					irected in this form and	d in Form
Debto	Charmaine Denise Gordon		12	2A-1S	nbb:		
Debto (Spouse	or 2 e, if filing)			■ 1. T	here is no presi	umption of abuse	
United	d States Bankruptcy Court for the: Northern District of	of Georgia		;	applies will be m	o determine if a presult and e under <i>Chapter 7</i>	•
Case (if know	number n)			□ з. т	he Means Test	cial Form 122A-2). does not apply now be service but it could ap	
					· · · · · ·		opiy iater.
∩ffi	cial Form 122A - 1				eck ii tiils is a	n amended filing	
		www.net N.A.s.	م دا برا ملاء				
Cna	apter 7 Statement of Your Cui	rrent Mor	ntniy ind	om	<u>e </u>		04/20
attach a case ni	complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to womber (if known). If you believe that you are exempted froing military service, complete and file Statement of Exemple: Calculate Your Current Monthly Income	which the additior om a presumption	nal information a of abuse becau	applies ise you	On the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
1. \	What is your marital and filing status? Check one or	nly.					
ı	■ Not married. Fill out Column A, lines 2-11.						
[\square Married and your spouse is filing with you. Fill $lpha$	ut both Columns	A and B, lines	2-11.			
[\square Married and your spouse is NOT filing with you.	You and your s	spouse are:				
	\square Living in the same household and are not lega	ally separated.	Fill out both Co	lumns	A and B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	legally separated	d under nonbar	nkrupto	y law that applie	es or that you and you	
101 the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-n 6 months, add the income for all 6 months and divide the tota uses own the same rental property, put the income from that p	nonth period would I by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh Aug de any i	gust 31. If the amo ncome amount m	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colur		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$	3,035.16	\$	
	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
f a	All amounts from any source which are regularly poof you or your dependents, including child support irom an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	t. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
5. N	Net income from operating a business, profession,						
			otor 1				
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	Ordinary and necessary operating expenses		Copy here ->	. ¢	0.00	\$	
	Net monthly income from a business, profession, or far Net income from rental and other real property	m \$	Copy liele ->	Ψ		Ψ	
6. N	vet income from rental and other real property	Deb	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	• \$	0.00	\$	
7. I	nterest, dividends, and royalties			\$	0.00	\$	

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Debto	Charmaine Denise Gordon			Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 o		
8.	Unemployment compensation			\$	0.00	\$	•	
	Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here:	nt received was a bene	fit under					
	For you Sour spouse S	0.	.00					
	For your spouse							
	Pension or retirement income. Do not include any a penefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, united States Government in connection with a disabilidisability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you fretired under any provision of title 10 other than chapter 61.	stated in the next sente or allowance paid by th ity, combat-related inju ces. If you received an pay only to the extent ou would otherwise be e	ence, do le lry or y retired that it	\$	0.00	\$		
10.	Income from all other sources not listed above. Sponot include any benefits received under the Social under the Federal law relating to the national emergenunder the National Emergencies Act (50 U.S.C. 1601 coronavirus disease 2019 (COVID-19); payments receirime, a crime against humanity, or international or docompensation pension, pay, annuity, or allowance pa Government in connection with a disability, combat-relideath of a member of the uniformed services. If necesseparate page and put the total below	Security Act; payments acy declared by the Pre et seq.) with respect to eived as a victim of a war mestic terrorism; or id by the United States ated injury or disability	s made esident the ar , or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add lieach column. Then add the total for Column A to the total for Column B total	otal for Column B.	\$	3,035.16	+		Total incom	3,035.16
12.	Calculate your current monthly income for the yea	r. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	y line 11 h	nere=>	\$	3,035.16
	Multiply by 12 (the number of months in a year)						X	
	12b. The result is your annual income for this part of the	ne form				12t	D. \$	36,421.92
13.	Calculate the median family income that applies to	you. Follow these ste	ps:					
	Fill in the state in which you live.	GA						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	online using the link s	pecified i	n the separa	ate instruc	13. tions	\$	53,105.00
14.	How do the lines compare?							
	Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top	l Form 122A-2.			•	•		224-2
Dow	Go to Part 3 and fill out Form 122A–2.	or page 1, criden bux 2	., <i>ine</i> pre	oumpuon or	abuse 18 (aotorriirieu D	y i OIIII I	<i>LL</i> N-L.
Part	Sign Below By signing here, I declare under penalty of perjur	v that the information o	n this sta	tement and	in any atta	echments is t	rije and a	correct
	X /s/ Charmaine Denise Gordon	y and the information of	กา แทอ อเส	noment and	in any alla		iue allu C	

Charmaine Denise Gordon
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Debtor 1	Charmaine Denise Gordon	Case number (if known)	
	Signature of Debtor 1		
Da	te June 9, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this for	m.	

Capital Bank/Open Sky 101 Crossways Park Woodbury, NY 11797

Capital One P.O. Box 31293 Salt Lake City, UT 84131

Cooling & Winter LLC P.O. Box 1280 Oaks, PA 19456

Discover Loan P.O. Box 15316 Wilmington, DE 19850

Emory Johns Creek Aesthetics 11975 Morris Rd 200 Alpharetta, GA 30005

Hamster Financial Service LLC P.O. Box 828 Skokie, IL 60076

JPMCB Card Services P.O. Box 15369 Wilmington, DE 19850

Kaiser Permanente P.O. Box 403055 Atlanta, GA 30384

Kohls/Capital One Bank PO Box 3115 Milwaukee, WI 53201 LVNV Funding assignee of Credit One Bank PO Box 10497 Greenville, SC 29603

Stenger & Stenger 2618 East Paris Ave Grand Rapids, MI 49546

US Bank
P.O. Box 108
Saint Louis, MO 63166

Wellstar Heath Sytem Douglas Hospital P.O. Box 277356 Atlanta, GA 30384

Wellstar Medical Revenue Service P.O. Box 1149 Sebring, FL 33871